

## "FEE ADDRESS" INDICATION FORM

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in the following listed application(s) for which the Issue Fee has been paid or patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
	10/628,167

(check one)	/Benjamin S. Withrow/
<input type="checkbox"/> Applicant/Inventor	Signature
<input type="checkbox"/> Assignee of record of the entire interest	Benjamin S. Withrow
<input checked="" type="checkbox"/> Attorney or agent of record <u>40,876</u>	Typed or printed name
<input type="checkbox"/> Assignment recorded at Reel <u>      </u> Frame <u>      </u>	919-238-2300 Customer's telephone number
	November 25, 2009
	Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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